# **PCT**

#### REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receive	ving	Of	fice	use c	nly —		
PCT/FR / 2 International Application No.	0	0	4	/	02	8	4

(05) 11 Looy International Filing Date

0 5 NOV. 2004

INSTITUT NATIONAL DE LA PROPRIÉTÉ INDUSTRIELLE DEMANDE INTERNATIONALE PCT Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference (if desired) (12 characters maximum) 346980 D 21726 FT

		(ij desirea) (12 chard	octers maximum) 346980 D 21726 FT			
	Box No. I TITLE OF INVENTION					
	Souches de microorganismes optimisées pour des voies de biosynthèses consommatrices de					
	1	erson is also inventor				
	Name and address: (Family name followed by given name; for a lega The address must include postal code and name of country. The country Box is the applicant's State (that is, country) of residence if no State of res	Telephone No.				
	METABOLIC EXPLORER BIOPOLE CLERMONT LIMAGNE	Facsimile No.				
	63360 SAINT BEAUZIRE FRANCE	Teleprinter No.				
<u>0</u>	[FR]		Applicant's registration No. with the Office			
	FR	State (that is, country FR	) of residence:			
D A D	This person is applicant for the purposes of:  All designated all designated the United the United States.	ated States except I States of America	the United States of America only the States indicated in the Supplemental Box			
	Box No. III FURTHER APPLICANT(S) AND/OR (FUR					
A REPL	Name and address: (Family name followed by given name; for a legal of The address must include postal code and name of country. The country of Box is the applicant's State (that is, country) of residence if no State of residence is no State of Residence if no State of Re		This person is:  applicant only  applicant and inventor inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office			
	State (that is, country) of nationality: FR	State (that is, country) FR	of residence:			
	This person is applicant for the purposes of:  All designated all designated the United	ed States except States of America	the United States the States indicated in the Supplemental Box			
	Further applicants and/or (further) inventors are indicated	on a continuation sheet.				
	Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE					
	The person identified below is hereby/has been appointed to act of the applicant(s) before the competent International Authorities	as:	gent common representative			
	Name and address: (Family name followed by given name; for a legal ent The address must include postal code and name of a	country.)	Telephone No. (33) 4 26 84 34 40			
	MARTIN Jean-Jacques, SCHRIMPF Robert WARCOIN Jacques, AHNER Francis, TEXI	Facsimile No. (33) 4 26 84 34 49 Teleprinter No.				
	LE FORESTIER Eric, CALLON DE LAMARO					
	Jean-Robert, Franck TETAZ CABINET REGIMBEAU	_				
	129 rue Servient - 69326 LYON cedex 03 - FRANCE		Agent's registration No. with the Office			
	Address for correspondence: Mark this check-box where space above is used instead to indicate a special address to y	no agent or common repre	sentative is/has been appointed and the			

Form PCT/RO/101 (first sheet) (January 2004)

Sileet No				
Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)				
If none of the following sub-boxes is used, this sheet should not be included in the request.				
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)  BOISART Cédric  119 rue Fontgièvre  63000 CLERMONT FERRAND  FR J  Applicant's registration No. with the Official designation. This person is:				
State (that is, country) of nationality:  State (that is, country) of residence:  FR				
This person is applicant for the purposes of:  all designated all designated States except the United States of America of America only the States indicated the Supplemental Experimental				
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)  CHATEAU Michel  les baumettes, appt 47-bât E1  63200 RIOM  [FR]  This person is:  applicant only  inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office				
State (that is, country) of nationality:  FR  State (that is, country) of residence: FR				
This person is applicant for the purposes of:  all designated all designated States except the United States of America only the States indicated in the Supplemental Bo				
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)  GONZALEZ Benjamin  4 rue Sidonie Apollinaire  63000 CLERMONT-FERRAND  [FR]  Applicant's registration No. with the Office				
State (that is, country) of nationality:  FR  State (that is, country) of residence: FR				
This person is applicant for the purposes of:  all designated all designated States except the United States of America of America only the States indicated in the Supplemental Box				
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)  SOUCAILLE Philippe Chant du coucou 31450 DEYME  [FR]  Applicant's registration No. with the Office				
State (that is, country) of nationality:  State (that is, country) of residence:  FR				
This person is applicant all designated all designated States except the United States of America of America only the States indicated in the Supplemental Box				
Further applicants and/or (further) inventors are indicated on another continuation sheet.				

Form PCT/RO/101 (continuation sheet) (January 2004)

<b>S</b>	
	Continuation of Box No. II FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)  If none of the following sub-boxes is used, this sheet should not be included in the request.
	Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)  This person is:  applicant only
r	FIGGE Rainer  32 rue Hyppolyte Gomot  63200 RIOM  applicant and inventor inventor only (If this check-box is marked, do not fill in below.)
RO	Applicant's registration No. with the Office
PAR	State (that is, country) of nationality:  DE  State (that is, country) of residence: FR
	This person is applicant for the purposes of:  all designated states except the United States of America of America only the States indicated in the Supplemental Box
KEMPL	Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)  ZINK Olivier  This person is:  applicant only
	1 place du sauvage 63000 CLERMONT-FERRAND  LFR Applicant's registration No. with the Office
f	State (that is, country) of nationality:  State (that is, country) of residence:  FR  State (that is, country) of residence:
	This person is applicant for the purposes of:  all designated States except the United States of America of America only the States indicated in the Supplemental Box
- 1	Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)  This person is:  applicant only  applicant and inventor  inventor only (If this check-box is marked, do not fill in below.)
	Applicant's registration No. with the Office
	State (that is, country) of nationality:  State (that is, country) of residence:  FR
l f	This person is applicant all designated all designated States except the United States of America only the States indicated in the Description of America only the Supplemental Box
	Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this lox is the applicant's State (that is, country) of residence if no State of residence is indicated below.)  This person is:  applicant only  applicant and inventor  inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office
St	ate (that is, country) of nationality:  State (that is, country) of residence:
fo	nis person is applicant all designated all designated States except the United States indicated in the purposes of:  States all designated States except the United States of America of America only the Supplemental Box
	Further applicants and/or (further) inventors are indicated on another continuation sheet.

Form PCT/RO/101 (continuation sheet) (January 2004)

Box No. V DESIGN	ATIONS			-		
The filing of this request filing date, for the grant of	constitutes under Rule 4.9(a), of every kind of protection avail	the designation of all Con lable and, where applicabl	tracting States bound by e, for the grant of both re	the PCT on the internation		
However,						
DE Germany is no	DE Germany is not designated for any kind of national protection					
KR Republic of Ko	orea is not designated for any k	aind of national protection				
RU Russian Federa	tion is not designated for any	kind of national protection				
(The check-boxes above may be used to exclude (irrevocably) the designations concerned in order to avoid the ceasing of the effect, under the national law, of an earlier national application from which priority is claimed. See the Notes to Box No. V as to the consequences such national law provisions in these and certain other States.)						
Box No. VI PRIORIT	Box No. VI PRIORITY CLAIM					
The priority of the followi	ng earlier application(s) is here	by claimed:				
Filing date	Number		Where earlier application	is:		
of earlier application (day/month/year)	of earlier application	national application: country or Member of WTO	regional application:* regional Office	international application receiving Office		
item (1) 06/11/03	0313056	FRANCE				
item (2)						
			1 :			
item (3)						
Further priority claims	s are indicated in the Supplemen	ntal Box.	·			
The receiving Office is require the earlier application was jabove as:	nested to prepare and transmit to filed with the Office which for th	the International Bureau a e purposes of this internati	a certified copy of the ear ional application is the re	lier application(s) (only if ceiving Office) identified		
all items i	tem (1) item (2)	item (3)	other, see	e Supplemental Box		
* Where the earlier applicat	ion is an ARIPO application, ind Gember of the World Trade Org	dicate at least one country	party to the Paris Conven	tion for the Protection of		
	······································	anization for which that ea	iriier application was file	d (Rule 4.10(b)(ii)):		
Box No. VII INTERNAT	ITONAL SEARCHING AUTI	HORITY				
	arching Authority (ISA) (if tw e the Authority chosen; the two-l	<del></del>	arching Authorities are co	ompetent to carry out the		
ISA / EPO	the manority chosers, the two-t	ener code may be used).				
	urlier search; reference to tha	it search (if an earlier sear	rch has been carried out l	by or requested from the		
Date (day/month/year)	Number	Country	y (or regional Office)			
23/03/04	FA 641	112 EP		_		
Box No. VIII DECLARA	TIONS			· · · · · · · · · · · · · · · · · · ·		
The following declarations check-boxes below and indica	are contained in Boxes Nos. Vitte in the right column the number	III (i) to (v) (mark the appler of each type of declaration	licable on):	Number of declarations		
Box No. VIII (i)	Declaration as to the identity of	of the inventor		:		
Box No. VIII (ii)						
Box No. VIII (iii)						
Box No. VIII (iv)  Declaration of inventorship (only for the purposes of the designation of the United States of America)						
Box No. VIII (v)	Declaration as to non-prejudio	cial disclosures or exception	ons to lack of novelty	:		

Form PCT/RO/101 (second sheet) (January 2004)

Box No. IX CHECK LIST; LANGUAGE	OF FILING			
Box No. IX CHECK LIST; LANGUAGE  This international application contains:  (a) in paper form, the following number of sheets:  request (including declaration sheets) : 5  description (excluding sequence listing and/or tables related thereto) : 33  claims : 2  abstract : 1  drawings : 0  Sub-total number of sheets : 41  sequence listing : 8  tables related thereto : (for both, actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (c) below)  Total number of sheets : 49  (b) \( \square\$ only in computer readable form	This international application is accompanied by the following item(s) (mark the applicable check-baxes below and indicate in right column the number of each item):  1.	Number of items : : :		
(Section 801(a)(i))  (i) sequence listing	purposes of international search under Rule 13ter :  (iii) together with relevant statement as to the identity of the copy or			
(ii) ☐ tables related thereto  (c) ☐ also in computer readable form (Section 801(a)(ii))  (i) ☐ sequence listing  (ii) ☐ tables related thereto  Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained the  ☐ sequence listing: ☐ tables related thereto: (additional copies to be indicated under items 9(ii) and/or 10(ii), in right column)  Figure of the drawings which should accompany the abstract:  Box No. X SIGNATURE OF APPLICANT	copies with the sequence listing mentioned in left column  10.  tables in computer readable form related to sequence listing (indicate type and number of carriers)  (i)  copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application)  (ii)  (iii)  (iii)  (iv)  (iv)	1 equest).		
Date of actual receipt of the purported	For receiving Office vision 2004  2. Drawings			
<ol> <li>Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:</li> <li>Date of timely receipt of the required</li> </ol>	received t not recei			
corrections under PCT Article 11(2):  5. International Searching Authority (if two or more are competent): ISA /	6. Transmittal of search copy delayed until search fee is paid			
For International Bureau use only				
Date of receipt of the record copy by the International Bureau:				

Form PCT/RO/101 (last sheet) (January 2004)

## 1. DECLARATION DE CONFORMITE ENTRE VERSION PAPIER ET VERSION ELECTRONIQUE

\_ 5 NOV. 2004

PCT/KN 04/02848

### EXTENSION A L'ETRANGER PAR LA VOIE PCT

Priorité:

FR 0313056 du 6 novembre 2003

Au nom de:

METABOLIC EXPLORER

N/Réf.:

346980 / D21726

Par la présente, nous certifions que le lisage des séquences faisant l'objet de disquettes qui sont déposées ce jour, a été réalisé de façon à ne pas inclure d'éléments allant au-delà de la divulgation dans la Demande Internationale.

Lyon, le 5 novembre 2004

#### CABINET REGIMBEAU

CONSEILS EN PROPRIETE INDUSTRIELLE

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Franck TETAZ